

**Application REACH Late Pre-registration**

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| 1. **Identity of Manufacturer/Importer/Exporter:**
 |
| Company Name |  | VAT number |  |
|  Address |  |
| Contact person  | Name |  |
| Phone/Fax |  |
| Email |  |
| 1. **Identification of Substance**
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| Substance Name | CAS number | Annual Tonnage Exported to EU | Date of exceeding 1 t/a limit  |
|  |  |  |  |
| 1. **Statement**
 |
| I guarantee that above information provided is accurate.Applicant: Signature: Date: |

Please return this application form to louise@cirs-reach.com or morgan@cirs-reach.com. If you have any questions regarding this service please do not hesitate to contact us.